

Inside: VA Rated A, 5 ☆ R&D Health Screening, 11 ☆ Appointments, 12

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On The Cover:

Michael Bergum, recycling coordinator for the Tomah, Wis, VA Medical Center, inspects bales of cardboard prior to transport to a paper mill for recycling. This load was used for asphalt shingles.

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NTRODUCING

Tim Cobb

Golf carts, flowered shirts and smiles in West Palm Beach, Fla., symbolize much more than a recreational outing. Just ask Tim Cobb, chief of Voluntary Service at West Palm Beach VAMC and lead initiator of golf cart transportation for veterans to and from the parking lot.

With a program that some people say borders on organized chaos, what's immediately evident is the West Palm Beach VAMC

volunteers are innovative and effective.

Cobb started the program prior to the facility opening three years ago. With a passion for doing the best for patients, Cobb assembled an enthusiastic staff of eight who supervise about 1,600 highly motivated volunteers.

Cobb held out for team players on his staff who had backgrounds in recruiting and community service.

The staff is creative and, above all, according to Cobb, "do not take no for an answer."

Cobb served previously as the chief of Voluntary Service and the staff assistant to the director at the Brooklyn, N.Y., VAMC for 14 years.

Co-workers refer to Cobb as a bit unconventional, but also as a progressive, task-oriented manager who stays totally focused on the goal of doing what's right for patients and their families.

Volunteers at this medical center have tremendous responsibility in all directions. Former Medical Center Director Richard Isaac called the VAVS Committee "his board of directors." Volunteers serve on committees within the medical center and are involved in policy-making decisions.

They may be unpaid, but their presence is counted on heavily. Cobb cites an example of a void created when one of the volunteers was on vacation. "His area was handled by a contractor in his absence."

Before volunteers begin assignments at West Palm Beach, they

receive a five-hour orientation and lots of written information on their commitment, value and responsibilities. They also receive computer training.

In addition to 77 service organizations, businesses within the community have been enlisted to provide support for various activities provided to enhance patient well being. Another strong component of the program is 200 youth volunteers.

"Enthusiasm is contagious here—it makes people want to donate time," Cobb said. "Volunteers have been heard to say they work harder here then they did when they were being paid."

Lucille W. Swanson, acting director, considers one-third of the workforce to be volunteers. "The success of the volunteer program at the West Palm Beach VA Medical Center, due in large part to Tim, comes from treating volunteers as equals. We make the volunteers stakeholders in the accomplishment our mission and vision," she said.

By Phil Kaplan West Palm Beach VAMC



Outlook

Jim W. Delgado Director, Voluntary Service



Dr. Kizer's Prescription for Change — 'The hospital is no longer the center of the health-care universe. Health care has become an ambulatory care-based

activity' — points the way to new opportunities for VA volunteers.

Although we will always need volunteers to assist our hospitalized veterans — and, in fact, will continue to try to increase volunteers' involvement in supporting inpatient care — the shift to providing more care in communities in which our volunteers live will allow them and VHA to expand our services to outpatients.

Volunteers have begun to serve veterans in new roles in outpatient clinics, contract nursing homes, homeless programs and extended-

Volunteers Adapt to Changing Health-Care Delivery

care activities such as hospital-based home care. They are responding by initiating guest relations and customer service programs. They serve as greeters and provide information assistance. They serve as patient advocates and address the special needs of the patients. Volunteers serve as senior companions for a certain patient population. Telecare volunteers maintain contact with patients before and after appointments to provide support and to identify needs. Some volunteers provide assistance to patients and their families in the home in support of a multi-disciplinary team of health-care providers.

Trends toward more local and home-based care will find the participants in VA's Voluntary Service program responding to new challenges in different environments. For one thing, as workloads in outpatient clinics and community-based programs continue to grow, so will the need to expand the volunteer transportation network. We will

need more people and vehicles to transport an increasing number of outpatients to and from clinics and medical centers. The Disabled American Veterans Transportation Network continues to grow and assist with these needs, as well.

I look forward to seeing the ranks of VA volunteers swell in exciting new settings designed to provide veterans with improved health care. The opportunities are endless for those interested in serving veterans in new and varied ways.

We've set a national goal of 15,000 youth volunteers by the year 2000. With their enthusiasm, civic spirit and potential career interest in health care, they help to define the future for VA volunteerism.

National Volunteer Week is April 19-25. I suggest taking some time to think about not just the vast number of hours of service performed by VA volunteers, but the volunteers themselves and their incredible value.

<u>War on Diabetes</u>

VA and ADA Form Partnership

VA and the American Diabetes Association (ADA), the largest voluntary health organization dedicated to diabetes research, have agreed to collaborate on projects to improve care for people suffering from diabetes.

Diabetes is the nation's sixth-leading cause of death and the leading cause of blindness in the United States today. Approximately 15 percent of veterans receiving care in VA hospitals and clinics suffer from it. Diabetes is characterized by high blood sugar levels that result from defects in the body's ability to produce and/or use the hormone insulin

VA and ADA will work together to define the most effective ways to

treat diabetes and to assess blood sugar monitoring devices and other technology. The two organizations will also share information that will guide research and enhance collaboration in other areas of mutual interest. Likewise, they will explore the feasibility of exchanging benchmarking information on quality, cost and productivity.

VA exceeds the national average in providing an eye exam to diabetic patients, according to Len Pogach, VA national diabetes program director. While 69 percent of diabetic veterans received an eye exam from VA in fiscal 1997, 42 percent of diabetics received the same from more than 300 managed health-care plans nationwide.

"Furthermore, even though VA exceeds the level of care found in communities, VA is committed to improving our record of service to this veteran population," Pogach said.

At VA's request, ADA will distribute its quality and technology assessment publications to VA medical centers. ADA publications include drug treatment monographs, technology reports and assessments, clinical practice bulletins, newsletters and project reports.

Under Secretary of Health Dr. Kenneth W. Kizer signed the memorandum of understanding with John H. Graham IV, Chief Executive Officer of the ADA. □

One-VA Survey Follow-Up Seeks Better Workplace

VA facilities across the country are engaging in an unprecedented amount of self-examination to improve morale and thus provide better service.

Generated by the departmentwide "One-VA" survey conducted last year, the self-examination has taken various forms, including employee conferences, task forces, special committees and local surveys to supplement the national survey.

Employees, directly and through questionnaires, are telling managers what they think is wrong; and bosses, some for the first time in their careers, are being forced to recognize unhappiness within the ranks.

And the dialogue is not over. Managers are being asked, every six months, to report on what they are doing to address employee concerns.

In a note to all facility directors, Deputy Administrator Gober in February ordered: "To ensure that we continue to work toward making VA the best place to work in government, I am asking that each of the major organizational elements of VA report back to the Strategic Management Steering Committee every six months on progress being attained, with the first report covering activities from January through June."

Gober has emphasized employee participation: "There is no one prescription for establishing priorities; however, I believe that we must actively involve employees and local partnership councils."

"In fact, after examining VA's overall results, and with input from our top management and our National Partnership Council, I am encouraging each facility in VA to emphasize employee involvement as a priority of common concern to all of us."

A second nationwide "One-VA" employee survey will be held in 1999 or 2000, and will be measured against the reports made since the first 1997 survey.

Gober stressed the importance he placed on the self-examination: "Other than serving our nation's veterans, there is no more important

priority than responding to our employees' concerns regarding the workplace."

Even before Gober's direction, facilities across the country had begun addressing local concerns raised by the report.

At the VA Medical Center in Tomah, Wis., for example, the results of the national survey were passed out to employees and discussed at two employee meetings chaired by the director.

Sandra Gregar, Support Service Line manager, said the medical center's executive council asked an oversight group to look for solutions to problems raised by employees.

The Assistant Secretary for Public and Intergovernmental Affairs called for a group of employees to explore and recommend changes in problem areas found in the "One-VA" survey. Nine volunteers teleconferenced and met three times over four months. They designed a survey of ASPIA employees to further determine opinions and develop recommendations.

Among proposals the group made, management accepted several immediately, including holding allemployee meetings monthly (teleconferencing field employees) and creating employee committees to study and improve the awards system.

The accumulation of data on employee morale not only will help managers but will allow VA executives to measure their offices against others, other government agencies and even the private sector.

Results are available on VA's intranet at http://vaww.va.gov/corpinfo. Bulletin board capabilities will be added in the near future. For those who wish to analyze any of the data for most field facilities, a site is on the intranet (http://152.125.190.53/qm/start.htm).

By Bonner Day

Your Ticket To a Secure Retirement



For a recorded message of current rate information, call 1-800-4US BOND

Invest Today, Enjoy Tomorrow

This year's Federal Savings Bonds Campaign runs May 1-31. Acting Secretary Togo D. West, Jr., is chair of VA's campaign, with Under Secretary for Benefits Joe Thompson the vice chair.

A volunteer canvasser will contact you soon about purchasing Bonds through the payroll savings plan.

Bonds offer a safe vehicle for investment, tax advantages and market-based interest rates from the date of purchase.

Want to Know What Your Bonds Are Worth?

Check out the Savings

Bond Wizard at www.publicdept.treas.gov/sav/savvalue.htm
This Windows program will calculate the value of your savings bonds and record and inventory them. You may also want to download the "Farnings Papert"

them. You may also want to download the "Earnings Report" from the website at the above address for your bond values.



VA Leads Government in Year 2000 Computer Fix

VA is the only federal department to earn an A from Congress for its efforts to manage the Year 2000 computer problem.

Rep. Stephen Horn, chairman of the House Subcommittee on Government Management, Information and

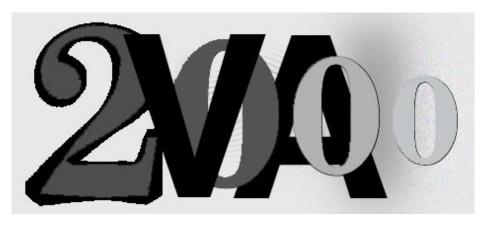
Technology, on March 4 announced the VA achievement.

Five agencies, including the Defense Department, received F's; and six agencies, including the Treasury Department, received D's.

Receiving A's with VA were the Social Security Administration and the National Science Foundation.

VA received the special recognition in part because it is expected to complete computer updating before January 2000.

"Phase one of this effort — defining the problem — took almost two years," said Horn. "Phase two —



solving the problem — must be completed in less than 22 months."

The projected five-year cost for Project 2000 at VA is \$166.3 million, including \$60.2 million for salaries, \$55.8 million for hardware, \$36.5 million for software and \$13.8 million for contractors.

Several factors have contributed to VA's tremendous success:

- VA encountered the problem earlier than other agencies because of the long-term nature of VA programs.
- VA has frequent legislative changes that require changes in

computer programs so its computer systems are designed to be flexible.

- VA has some of the same employees who wrote the original computer programs 20 years ago so they are well prepared for the work.
- VA has few state or local interfaces of computers to complicate VA corrections.

But the Office of Management and Budget has stepped up the challenge, ordering agencies to have all of their mission-critical systems year 2000 compliant by March 1999. And guess what?

"We are on target to meet our goal," says Ernesto Castro, VA's project manager for Year 2000 compliance in Information Resources Management.

Acting Secretary's Travel Schedule Heats Up

cting Secretary Togo D. West, Jr., visited Togus, Maine, VA facilities in March and first met with veterans services organizations and congressional staff. After a tour of the medical center and a visit with veterans and VA staff, he went to the regional office and also answered media questions.

While talking to a group of veterans concerned about the future of Togus, the nation's oldest VA medical center, the Acting Secretary assured the group that Togus' future was secure and changes would improve services.

Recent changes include a video link with the Providence, R.I., VAMC to help dermatology patients be seen by a specialist without further travel, and two primary care practice groups with four physicians that have drastically reduced the patient appointment waiting times.

The Acting Secretary also made an appearance at the Jackson, Miss., VAMC in late March. Speaking engagements in the near future will take him to Perry Point, Md., Nashville, St. Cloud, Minn., and Denver.



From left, Donald Smith of the Veterans of Foreign Wars, John Davis, VFW and Native American Veterans Association, and Acting Secretary West at the Togus, Maine, VA Medical Center.





Backbone and support — we all take them for granted — whether it's our own back or distant, unseen coworkers providing vital job support.

We don't think about either until something goes wrong.

Herein lies the anonymity of the Austin Automation Center(AAC), VA's backbone of department-wide data processing support.

Although the AAC has been around since 1965, it isn't necessarily a household word within VA, largely because its vital support, touching virtually every VA employee, product and service, never falters.

Some 325 AAC employees work quietly and competently ensuring that their 240,000 fellow VA employees accurately log in time and leave, regularly receive paychecks, stay connected through e-mail and have ready computer access to current, accurate veterans statistics, medical and benefits data and all other information they need to do their jobs.

Making good service cheaper

AAC staff focus on more than maintaining good service. Their emphasis is on making it better and cheaper. AAC efficiencies and economies translate to value added at the delivery end of VA services. For example, the rates AAC charges VA organizations and other customers for computer processing time have dropped 20 percent over the past five years.

"If there's anything we can do to make an employee's job easier through the use of information technology, we are prepared to do it. We will ensure customers get their data the way they want it, when they want it,"said AAC Director Bob Evans.

The AAC is VA's central data repository and offers a variety of other services that stem directly from that primary role. Those include input/output services such as printing, microfiche, mail processing,

data entry services and full-service help desk and technical support.

If there is a system problem or if customers cannot access data, the AAC offers expanding help desk and technical support services to all customers by phone at 512-326-6780.

Selling services outside

As a franchise fund, the AAC is now offering services developed to support VA to other agencies through interagency agreements and specific service commitments. This is good news for VA because more customers will help to continue to lower costs of the services Austin provides.

The Housing and Urban Development Department's Office of Federal Housing Enterprises Oversight hired AAC to manage its business-related computer applications. The National Archives and Records Administration in St. Louis also uses Austin for data processing.

The U.S. Army Medical Command, Department of Justice, NASA and GSA are customers of the AAC Workers Comp/Safety Tracker software package.

Developed by the AAC for VA, the in-house workers' compensation and safety tracker program is now available to all federal agencies. It is a Windows-based PC application to enhance the management of all federal workers compensation and occupational safety and health programs.

Combined with weekly updates from the Department of Labor, it is proving to be a valuable management tool for controlling and reducing compensation costs and monitoring claims activity online.

Another successful software package developed by the AAC is the PC Financial Reports System. It provides features such as preformatted financial reports, two or three-dimensional financial graphs and other file formats that are

automatically downloaded to the customer's PC or network.

The beauty of Austin's capabilities is how the application systems are supported by the strengths of its tried and tested mainframe systems yet offer the flexible processing that PCs and local area networks (LANs) offer customers at local sites.

Ensuring backup

The AAC also provides disaster planning and recovery services. Its disaster recovery contract with an outside source provides for full restoration of services in the event of a disruption in Austin, ensuring that VA applications will continue to be available for customer use.

When asked what he sees down the road for AAC, Director Evans says, "We take our role as VA's corporate data center very seriously. We want to focus our energies on developing ways to enhance existing services and to develop new information technology business solutions for the benefit of our customers. For instance, we are working on allowing customers to access their applications via the Internet."

AAC products and services will be on display at the annual Information Technology Conference (ITC), co-sponsored by the AAC and the Veterans Health Administration in Austin, Texas, August □10-13. Offered without a registration charge, the conference is intended for all AAC customers, which includes just about everybody in VA. For information, e-mail: vaitc@mail.va.gov.

Questions about the products and services available at the AAC can be addressed to the Business Development Staff, tel.: 512-326-6191, e-mail: dvac@mail.va.gov.

You can reach the AAC Intranet site at http://152.125.188.38/ austinet/and web site at www.aac.va.gov. □

A Look at Reinvention, VA's Achievements

Vice President Observed 5-year Anniversary in March

Vice President Gore praised federal workers for their achievements recently: "... we have stopped government as usual," he said, "and have undertaken a sustained effort to really change the way government serves the American people."

Noting that much work is left to be done, he expressed hope that the phrase "good enough for government work" — introduced as a symbol of quality during World War II — would regain its original meaning.

Documents related to the fifth anniversary are on NPR's web site at www.npr.gov. These include the Presidential directive on Conversations with America that calls for the heads of departments and agencies to "increase efforts to engage customers in conversations about further improving government service." Also on the web site are the Vice President's March 3 e-mail message thanking federal workers, and "America Anywhere," a directory of toll-free numbers and web sites by subject rather than agency name.

VA responds to challenge

When the Vice President introduced the National Performance Review in 1993 — recently renamed the National Partnership for Reinventing Government — VA got down to business to reshape the agency. The department developed service standards that meet customers' needs, cut obsolete regulations and directives, and formed partnerships.

Early on, VA eliminated wasteful use of resources. The VA Supply Depots ceased centralized distribution of pharmaceuticals, medical supplies and subsistence in favor of just-in-time delivery directly from vendors. This change reduced 277 full-time employee (FTE) positions and saved \$79 million.

VA's reinvention labs (New York Regional Office, Baltimore/Perry Point/Fort Howard, Md., and Milwaukee VA Medical Centers, and the Sioux Falls, S.D., VAM&ROC) implemented patient- and customer-focused approaches to claims processing and health care.

Completed VA initiatives include development of a management policy framework that decentralizes decisionmaking authority, a revised Medical Care Cost Recovery policy that allows funds collected to be used to defray collection costs for all categories of Veterans Health Administration (VHA) receivables, and joint recommendations to improve Department of Defense disability retirement and VA disability compensation payment processes. VA also began using the Purchase Card Program, which authorizes employees to purchase small-dollar value items, established a departmental Quality Council and developed customer questionnaires.

By fiscal 1996, the number of supervisors declined by 28 percent, headquarters staff was cut by 19 percent and management control positions were reduced by 6 percent. In fiscal 1996, 5,864 employees retired from VA, 2,220 received buyouts and 3,644 opted for volunary early retirements without buyouts.

VHA, VBA set goals

In fiscal 1997, the Vice President identified 31 Reinvention Impact Centers throughout the federal government to improve services that directly affect the American public. VHA and VBA were named two of the 31 centers. The centers provided a summary of goals they intend to achieve by the end of fiscal 2000 in comparison with fiscal 1996.

Deputy Secretary Hershel Gober established the Scissors Award to recognize employees who were responsible for common-sense initiatives that streamlined operations and saved money. Nearly 200 have been presented.

The Vice President has recognized VA's reinvention progress by giving about 100 Hammer Awards to VA teams through 1997. (See pages 8-9.)

Recent Hammer Awards

The Case Manager Team at the *Philadelphia VARO&IC* implemented a customer-friendly approach to processing benefits claims. A single point of contact, the case manager, calls claimants, explains the process and gathers any additional information. This approach replaced issuing a series of impersonal and sometimes confusing form letters. It resulted in a 37 percent reduction in processing time and in the number of inquiries from confused and dismayed claimants

In 20 months, the 11 West Day Treatment Center Team at the *Hines*, *Ill.*, *VA Hospital* redesigned chemotherapy administration from inpatient to outpatient procedures.

The new process allows patients to use the 11 West Day Treatment Center for procedures requiring increased nursing monitoring and intervention typically found only in the acute care setting. This change has reduced the length of stay by three days for each patient previously admitted for chemotherapy.

The team also developed a protocol that provides a self-directed patient assessment to identify the side effects of chemotherapy that can be reduced by increased patient participation and staff interventions. This has been expanded to patients receiving radiotherapy. It has meant a more efficient, coordinated care delivery process, as measured by a significant decrease in the chemotherapy side effect rate.

An estimated cost avoidance of \$128,658 per month and improved customer service are the end results.

A partnership between VA and the County Veterans Service Officers (CVSOs) in Ohio led to the Access to the Benefits Delivery Network Team at the *Cleveland VA Regional Office*.

The access group arranged to deploy surplus VA computers to CVSO offices and provide for training in use and security. This gave CVSOs who have power of attorney direct access to veterans' records. This direct input should improve claims processing time.

VA HAMMER AWARD STARS

1997

- 1/1: VACO, Inter-agency Benchmarking & Best Practices Council home page
- 2/1: N.Y. VARO, Social Security Access Team
- 2/24: Cleveland, Ohio, VARO Loan Service and Claims Team.
- 3/1: Newark, N.J., VARO, Ex-POW Service Team
- 4/3: VACO, Environmental Management Service, laundry operations
- 4/25: Houston VAMC/San Antonio, Texas, VARO, Medical Exchange Team
- 4/29: Denver Distribution Center, Remote Access Team
- 5/9: Manchester, N.H., VAMC, Portsmouth Clinic Design Team
- 5/13: Asheville, N.C., VAMC Nursing Home Team
- 5/29: Ann Arbor, Mich., VAMC, Cardiac Observation Unit Team
- 7/10: New Orleans VARO, LAN Team, loan guaranty streamlining
- 7/31: VACO/Hines, III, Procurement Work Group
- 8/26: Chicago VAMC (West Side) /Chicago VARO, Outbasing Initiative Team, reinventing C&P process
- 8/26: North Chicago VAMC/Chicago VARO, Pre-discharge Claims Processing Team, reinventing C&P process
- 9/19: Palo Alto, Calif., VAMC, Willow Creek Team, leased space to community services
- 9/24: St. Paul, Minn., VARO&IC, Customer Service Team
- 10/2: Walla Walla, Wash, VAMC, WSP/VA Child Care Team
- 10/2: Portland, Ore., VAMC/Wilkes-Barre, Pa., Utilities Management Team
- 10/8: Washington, D.C., VAMC, Welfare-to-Work Federal Hiring Team
- 10/16: Indianapolis VAMC, CHAMPUS Planning Group
- 10/16: Indianapolis VAMC, Enhanced Use Team
- 10/29: **Detroit VARO**, Nod Squad Appellate Team
- 12/9: Cleveland, Ohio, VARO, Access to Benefits Delivery Network Group.
- 12/11: VHA VISN 12, Chicago/Railroad Retirement Board, disability physicals
- 12/11: Hines, III., VAH, 11 West Day Treatment Center Team
- 12/18: Philadelphia VARO&IC, Case Manager Team

1996

- 2/15: **Denver CHAMPVA Center**, one-stop shopping
- 3/26: Milwaukee, Wis./Iron Mountain, Mich., VAMC Telepathology Team
- 4/3: Topeka, Kan., VAMC, Radio Frequency Computer System for Medication Administration
- 4/9: Martinsburg, W.Va., VAMC, VA On-Line
- 4/30: Buffalo, N.Y., VARO, Veterans Assistance Inquiry Team
- 5/1: VHA/VACO Facilities Management Office, Reengineering Design and Construction Standards
- 5/10: Los Angeles VARO, VA Valencia Telecommuting Office
- 5/10: Los Angeles VARO, Streamlining Loan Guaranty Appraisal Process
- 5/10: Manchester, N.H., VARO, Veterans Services and Adjudication Division, The Thursday Group
- 5/10: Manchester, N.H., VARO, Loan Guaranty Division streamlining
- 7/9: Hampton, Va., VAMC, Reinventing Laboratory Reference Testing
- 7/10: Fort Meade/Hot Springs, S.D., VAMC, Black Hills VA Alliance
- 7/15: Pittsburgh (University Dr.) VAMC, Parking Veterans First Team
- 8/12: St. Louis, Mo., VAMC, Retail Operations Team
- 8/15: Tampa, Fla., VAMC, Radiology Transportation Project
- 9/5: VACO, Acquisition & Materiel Management, State Veterans Homes Task Force
- 9/5: VACO, Acquisition & Materiel Management, Reinvention of Enhanced Supply Support
- 9/5: VACO Facilities Management, Procats Team, proactive claims analysis and tracking system
- 9/18: Cleveland VARO, The Cleveland Concept, case management
- 9/25: Minneapolis VAMC, Back to Basics, streamlining customer services
- 9/27: **Anchorage VAM&ROC**, reengineering primary care teams
- 10/8 Little Rock, Ark., VAMC, Pharmacy Process Revision Team, redesigning mailout program
- 10/8: Little Rock VAMC, Project Action Planning Group, customer service
- 10/15: Spokane, Wash., VAMC, Reengineering Medical Care Delivery
- 10/24: **Denver VAMC**, Recycling Program Monitors Team
- 10/28: Coatesville, Pa., VAMC, Sewer Line Team
- 10/29: Detroit VARO, The PitBulls, special inquiry processing

- 11/7: VACO, VA Credit Card System Team, procurement streamlining
- 11/15: VACO, VA Blue Pages Team, customer service
- 11/21: Hines, III, VAH, Discharge Process Action Team
- 12/16: Cape May, N.J., VA partnership with Coast Guard to provide medical services at CG Training Center
- 12/18: Iowa City VAMC, Reorganization Taskforce, patient-centered care model

1995

- 5/2: New York VARO, Interim Skills-based Pay System
- 5/5: Atlanta VARO, Government Owned Real Estate Team
- 5/11: Albany, N.Y., VAMC, Clinical Pathway for Hip Replacement
- 5/12: Tucson, Ariz, VAMC, Telephone Linked Care Team
- 5/19: Milwaukee VAMC, Home Oxygen Quality Improvement Team
- 5/25: VA National Acquisition Center, Hines, III., VA National Purchasing and Contracting
- 5/31: NCS/VACO, Burial Operations Support System
- 5/31: VHA/VACO, Office of Quality Management, New Customer Satisfaction Survey Program
- 6/26: Milwaukee VAMC Central Region Contract Service Center, consolidation of contracting
- 7/14: San Antonio, Texas, VAMC, Government-Private Sector Sharing Program
- 7/17: Houston, Texas, VAMC/VARO, VA Regional Office Building co-located at VAMC
- 7/25: Hines Service and Distribution Center, Computer Upgrade Program
- 8/16: St. Louis Canteen Service, Food Concept Development Team
- 8/22: Columbus, Ohio, Outpatient Clinic, Medical Care Cost Recovery Team
- 9/14: Brooklyn, Bronx, Montrose, Northport VAMCs, N.Y.; East Orange and
 - Lyons VAMCs, N.J., New York Vet Center and New York VARO, Greater New York City VA Consortium on Homeless Veterans
- 10/11: Livonia, Mich., VBA Central Area Office, Human Resources Management Team, consolidation of services for 10 states into one office
- 10/11: Ann Arbor, Mich., VAMC, Lodging Program Team
- 10/12: Lebanon, Pa., VAMC Asbestos Management Team
- 10/25: St. Paul, Minn., VARO&IC, Insurance Division, self-directed work teams
- 10/25: Manchester, N.H., VAMC, Reinventing Surgical Service procedures
- 11/27: OA&MM/VHA & Lyons, N.J., VAMC, Clothing for Homeless Veterans
- 12/5: Portland, Ore., VARO, Veterans Service Center, self-directed work teams
- 12/12: VBA/Cleveland VARO/Defense Finance Service, Retiree Death Gratuity Payments Team

1994

- 3/11: New York VARO, Self-directed Work Teams (first Hammer Award ever presented)
- 9/20: Batavia, N.Y., VAMC, Outpatient Relocation Design Team
- 9/20: Detroit, Mich., VARO, Partnership Council Team
- 9/21: Little Rock, Ark., VARO, Original Claims Team
- 9/22: White City, Ore., Domiciliary, Policy and Procedure Reengineering Team
- 9/24: Sioux Falls, S.D., VAM&ROC, Reinvention Teams (first to meet national timeliness standards for claims processing)
- 9/27: Des Moines, Iowa, VAMC Clinic Clerk Team, improved customer service
- 9/28: Denver VAMC, Consolidated Contracting Activity Team
- 9/28: Pittsburgh (Highland Dr.) VAMC, Acquisition and Materiel Management Service Team
- 9/28: Prescott, Ariz., VAMC, Voluntary Service Guest Relations Team
- 9/29: Dayton, Ohio, VAMC, "Drugs R Us" Pharmacy/Acquisition and Materiel Management Services Team
- 9/29: North Chicago VAMC, Managed Care System Development Team
- 9/29: Richmond, Va., VAMC, Geriatrics Health Care Center Team
- 9/30: Oakland, Calif., VARO, Veterans Service Division, "Nu Team"
- 10/13: **Omaha, Neb., VAMC,** Fiscal Service Medical Cost Care Recovery Team 11/10: **Louisville, Ky., VAMC,** Electronic Paperless Travel Management System
- 12/7: VACO Financial Operations, Electronic Commerce Initiative

^{*}If you know of any Hammer Award winners through 1997 not listed, please call Carstine Thompson at (202) 273-5071.

VA Reduces, Reuses, Recycles

he Tomah, Wis., VA Medical Center and the National Memorial Cemetery of the Pacific (NMCP) are among VA facilities saving money and natural resources as Earth Day 1998 approaches.

More VA facilities are reducing, reusing and recycling this year because those three activities are key



Over 12,000 fluorescent lights are used and recycled at the Minneapolis VAMC each year.

parts of a message that the Office of Acquisition & Materiel Management (OA&MM) is sending. OA&MM has just sent a video, "The Top Ten Reasons," to all field facility directors, encouraging its use for environmental training. Last but not least among the 10 reasons for recycling salvageable work materials is that the Resource Conservation and Recovery Act of 1974 and several executive orders require federal agencies to recycle materials, to buy recycled products and to use fuels more efficiently.

The Tomah VAMC saved \$83,000 last fiscal year primarily by reducing its costs of hauling and employees preparing materials for recycling. It also brought in nearly \$13,000 in sales of such commodities as office paper, newspapers, cardboard, plastic bottles and cans. The money from the sales is used to pay five veteran patients in the incentivetherapy program who collect, sort, process and help market the recyclables.

Mike Bergum, recycling coordinator, trained the veterans to use a

bailer and a paper shredder. He says sales pay for three fourths of their wages; the therapy program covers the rest. A local school district brings recyclables to the medical center which are included in the center's processing and sales. Bergum's Love Your Earth Recycling Center has the motto "Customer Service, Commitment, Champions."

> The golden plover, a bird which stops in Hawaii on its migratory path from Alaska, is arriving in greater numbers and staying longer to feed on the pesky insects that bother visitors to the national cemetery at Honolulu. That's because cemetery managers discovered they could reduce their use of insecticides by relying on the plover. Cemetery Director Gene Castagnetti says he probably saved \$5,000 over two years.

Fred Martinez,

manager of Environmental Programs in OA&MM, said facilities benefit by including environmental issues in their business plans. Facilities usually begin recycling by selling basic waste material. In the effort to continue recycling they often overlook the need to buy recycled products, said Martinez. VA is required to buy 32 products, ranging from plastic traffic cones to plastic desktop accessories and paper binders. (These products were designated by the Environmental Protection Agency, in accordance with the law.)

Recycling or selling waste material reduces costs associated with hauling waste, and facilities that continually review the commercial market prices for recycled materials can realize profits, said Martinez. Furthermore, when the profits are used to enhance the recycling program, even more profits can be made, he said.

Martinez also makes the case for VA facilities to consider managing their waste hauling contracts actively. Some use hauling contractors to handle their entire program, even giving contractors recyclable materials in exchange for lower hauling rates. He said market prices change constantly and when someone outside the staff calculates the rates the facility can't be sure it's getting the best possible return for its products.

"Source reduction" — the reduction of packaging — is another part of environmental business. Martinez said employees making purchases should ask vendors if packaging can be reduced or returned. In negotiating such a reduction, shipping costs may also be reduced.

Selling paper to be recycled could be more cost-effective if offices would provide a paper receptacle in each employee's workstation. "At almost anytime you pass by a workstation you can see paper in a trash receptable that should be recycled," said Martinez. "Normally each workstation has a trash receptacle, but the paper receptacle is centrally placed among several employees. The situation should be reversed."

Bronx, DOE, **ConEd Partner** To Save Energy

Through the largest singlebuilding, federal-utility partnership project anywhere in the nation, the Bronx VA Medical Center will realize an annual savings of more than \$1 million in annual utility costs.

The joint venture, in cooperation with the Department of Energy (DOE) and Consolidated Edison Company, has allowed the start of construction of a \$5.5 million energy efficiency project at the VAMC. Financing by Con Ed has enabled undertaking of a comprehensive project for lighting, heating and cooling, and rooftop solar panel installation.

R&D Office Conducts Health Screening for VSOs

he first health education and screening program for a national veterans service organization was conducted last month by VHA's Office of Research and Development.

Some 275
members of the
Veterans of Foreign
Wars were tested
for diabetes at
VFW's mid-winter
convention in
Washington, D.C.,
by more than 20
medical professionals from the
Washington, D.C.,
VA Medical Center
and other facilities.

The cost of the medical screenings, and breakfast afterward, was covered by the Pharmacia & Upjohn



Company.

At VFW's annual meeting next summer in San Antonio, Texas, the Research Communications Division of the Office of R&D will repeat the screening program and present a lecture on diabetes with the American Diabetes Association. Research Communications plans programs for other veterans organizations in cooperation with nonprofit health-care groups and pharmaceutical firms.

During two days of the week-long Washington meeting, VFW members had their glucose and cholesterol levels, blood pressure and weight checked. VAMC staff sent results directly to the veterans. Podiatrists examined their feet for problems related to diabetes. Optometrists, led by William Monaco from

VACO, examined eyes for retina problems such as cataracts. □

With Change May Come STRESS

What makes us One-VA? We all work in a dramatically changing environment. With change comes stress. Iowa City VA Medical Center Director Gary L. Wilkinson shared his thoughts and advice on that challenging combination with his fellow employees in this column from the medical center's newsletter "Iowa City VA NEWS." We think all of us in the changing world of One-VA can benefit from it.

How much of our time and energy is spent worrying? What's coming next? How will I be affected? Will I measure up to the demands of the next change?

Worry leaves a short supply of enery left to invest in actual work. Imagining the worst makes a harder day at work. Instead of worrying about bad things that might happen, get busy creating the kind of future you want. This takes serious concentration, but it's worth the effort.

One of the best techniques for

stress prevention is to keep updating our skills so that we are highly employable. Sometimes we think that we can learn by watching, but the learning curve may be too slow from the sidelines, leaving little opportunity for real growth. Broaden your base and accept new assignments to learn new skills.

Some worrying results when we try to stabilize or control an ambiguous or uncertain situation. Often, we are bothered by an unclear future or shifting work role. Burnout can occur when we try too hard to establish order and consistency. A strong need for closure in an unsettled situation can be very frustrating.

Instead, we can learn to improvise; it is an essential skill in survival. We can develop a greater tolerance for constant change and allow a little more confusion in our lives. If we fit ourselves to the immediate demands of the situation, instead of struggling to make the job adapt to us, we can

develop greater flexibility. Accepting change is not an easy task, but recognizing our "worry" behavior is the first step in changing behavior when we are confronted with change. This is difficult, and a feeling of awkwardness is natural when beginning something new.

Some other things to remember: Tackle change in small doses. Too many changes at one time are nearly impossible to handle, so focus on only one, two, or three small things at a time.

Change often involves giving something up, so mourn your loss. But do not forget to stay focused on what you are gaining.

Relapse is natural, but it will not reverse the process of change.

Accept that you will blow it once in a while, but after you notice it, get back on track. Once we master some of the survival skills for change, we feel at ease and leave worrying behind.

Peter H. Dougherty, a longtime advocate for the homeless, was named coordinator for VA programs for homeless veterans. Since 1994, Dougherty has been program manager of the Vet HELP Program for the VA Maryland Health Care System and a special assistant on homelessness to VA's Secretary and the Under Secretary for Health.

From February 1993 until 1994, Dougherty was a member of the staff of the Senate Veterans' Affairs Committee and earlier was on the staff of U.S. Rep. Harley O. Staggers, Jr., (D-W.Va.), who was on the House Veterans' Affairs Subcommittee on Housing and Memorial Affairs.

Robyn Y. Nishimi, Ph.D., was appointed Chief of Staff for the Under Secretary for Health. She is the former Executive Director of the Presidential Advisory Committee on Gulf War Veterans Illnesses.

Nishimi previously served as a senior associate and project director for the congressional Office of Technology Assessment. Earlier she

Appointments Appointments Appointments

served in the office of the late Congressman Mickey Leland, and for the House Subcommittee on Health and the Environment, for which she was a legislative assistant. She has also worked at the Institute of Medicine, National Academy of Sciences, as a senior program officer and study director.

She holds a bachelor's degree in genetics from the University of California, Davis, and a doctorate in molecular biology from the University of California, Irvine, where she was a University of California Regent's Fellow.

Dr. Lawrence Deyton, chief of the HIV Research Branch at the National Institute of Allergy and Infectious Diseases (NIAID), has joined VA to direct the AIDS Service. Before assuming his VA position, Deyton served as acting director of the Division of Extramural Activities at NIAID, which is part of the National Institutes of Health (NIH), and established NIAID's Community Programs for Clinical Research on AIDS, a national AIDS research program. He also was an attending physician at an HIV/AIDS clinic at the Institute and, since 1995, has held a concurrent clinical faculty position at Johns Hopkins University School of Medicine.

He was co-founder of the Whitman-Walker Clinic, a multiservice community clinic recognized as a major resource for AIDS care in the nation's capital.

Deyton earned his medical degree from George Washington University School of Medicine, Washington, D.C. He received a master of science degree in health policy and management from the Harvard School of Public Health, after completing a special major in urban health at the University of Kansas.

GEICO Honors 2 VA Employees, 1 Retiree

wo VA employees and one retired VA staff member are among five federal government winners of the Government Employees Insurance Company (GEICO) Public Service Awards. They include **Dr. Bryon Adinoff**, head of the substance abuse team of the Dallas, Texas, VAMC, Chris Bacorn, Ph.D., staff psychologist and Veterans Industries program coordinator at the San Antonio, Texas, VAMC, and **Glennie Y**. Googe, R.N., retired operating room supervisor, Mountain Home, Tenn., VAMC. Each received \$2,500.



Adinoff

Adinoff was cited for his work in substance abuse treatment and prevention over a period of 15 years. He reorganized treatment programs at the Dallas and

the Charleston, S.C., VAMCs to provide personalized treatment rather than a "one-size-fits-all" approach.

As a researcher, Adinoff has explored the biological basics of substance dependence, resulting in studies that have advanced understanding of the alcohol and cocaine-addicted patient. He has published more than 50 papers and received a grant award from the National Institute of Drug Abuse.



Bacorn

recognized for reorganizing and coordinating the Veterans Industries (VI) Program at San Antonio VAMC. He became coordinator of VI in 1994.

Bacorn was

Under his leadership, 47 veterans have received training and jobs in the

last three years and 128 have been hired by the hospital in the same timeframe.

Bacorn's work with local and state vocational rehabilitation and other support agencies has helped provide educational benefits and retraining to veterans.

Googe was selected for her work in physical rehabilitation. Since retiring from the medical center in 1981, Googe has continued to apply her healing skills in the community. The Advisory Board for Widowed Persons Services, the Widowed Persons Reach Out, the American Red Cross's Blood Services, the Senior Citizens Center, Camp Carson (a mission group of young girls) and the Four Oaks Nursing Home are just some of the organizations she has served. She heads a missions project through her church and has held officer positions with the National Association of Retired Federal Employees. Googe doesn't consider helping others to be volunteering — it's just her way of life.



Study Reveals Link Between Inflammation, Clogged Arteries

Researchers at the San Diego, Calif., VA Medical Center have taken a major step toward understanding how inflammation causes atherosclerosis, clogging of arteries — the leading cause of death in the United States.

Reporting in the January 15 issue of the Journal of Clinical Investigation, a team led by Dr. Robert Terkletaub found large numbers of a specific receptor — a "docking site" for proteins that drive immune system attacks — on inflammatory cells invading coronary blood vessels in both mice and humans. Mice with immune system cells carrying the receptor developed severe atherosclerosis, while those without the receptor had little or no development of the condition.

Terkletaub, who collaborated on the research with colleagues from VA and the Scripps Research Institute, noted that investigators have long been puzzled by the inflammation inherent in atherosclerosis. He said immune system cells called macrophages, which normally repair damage in the arteries, misfire in atherosclerosis. Reacting to injury to the artery lining caused by factors such as hypertension and high cholesterol, macrophages begin devouring the blood vessel wall. That damage promotes accumulation of fats and plaque, beginning a cycle of injury and invasion by macrophages.

"We were startled to see large numbers of these receptors on macrophages in atherosclerotic tissue from both mice and humans," Terkeltaub said. "That argued that they are doing something important in the diseased tissue. If we could keep macrophages from invading the artery walls, we would have a potential way to prevent atherosclerosis."

Dental X-rays May Help Reduce Risk of Stroke

Investigators from VA and Harvard University have found new evidence that routine panoramic dental X-rays may help reduce some people's risk of stroke by detecting dangerous artery blockages.

In the March 15 issue of Oral Surgery, Dr. Arthur H. Friedlander of the Sepulveda, Calif., VA Medical Center, and colleagues reported that X-rays revealed calcium and cholesterol plaques in neck arteries of seven (21 percent) of 33 patients who had previously received radiation therapy to treat head and neck cancers. That compared to 4.7 percent of 107 control patients who had not received radiation but were matched with study subjects for factors in stroke risk, such as age, high blood pressure and smoking.

"This study tells us that radiation treatment, while helping us cure cancer, has some side effects that increase the risk of stroke," Friedlander said. "Our findings alert us that physicians caring for these patients must routinely evaluate their carotid arteries."

Friedlander said early detection of blockages can save lives through lifestyle changes, medication or surgical removal of plaque to reduce stroke risk. He said dentists can play an important role in this effort, because patients who have undergone radiation therapy to the head and neck region often suffer from dry mouth and other conditions that bring them into contact with dentists.

Middleton Award Winner Announced



Dr. Marc A. Schuckit, a world leader in the study of alcoholism, has won the 1997 William S. Middleton Award, VA's highest scientific honor.

Established to honor VA's Chief Medical Director who served between 1955 and 1963, the Middleton Award is presented to a VA physician scientist for outstanding achievement in biomedical research.

Schuckit serves as the director of the Alcohol Research Center at the San Diego VA Health Care System and professor of psychiatry at the University of California-San Diego. He was cited for more than 20 years of pioneering research, including studies of the importance of genetic influences in alcohol dependence. His innovative population studies set the stage for exciting progress now being made in research to identify genes that play a role in alcoholism.

Schuckit is especially well regarded for a landmark study in which he investigated the relationship between the intensity of alcohol's effect and later alcoholism.

He and his colleagues followed 453 young men for 10 years and found that those in whom alcohol initially had little effect were far more likely to have become alcoholics. This clearly raised the possibility that some genes controlling initial reaction to alcohol may contribute to development of alcoholism.

Schuckit's international standing as a distinguished researcher, clinician and educator has brought him numerous honors and awards. His publications number almost 400, including the textbook "Drug and Alcohol Abuse: A Clinical Guide to Diagnosis and Treatment," among the most highly regarded in the field.

By Dan Bruneau and Pat Forsyth VA Research Communications



Mountain Home, Tenn., VAMC received two top awards at the Tennessee Nurses Association meeting in Nashville. Susan Moss-



Cureton, the center's associate director for Patient Care, received the association's Nursing Administration

Award. She was cited for initiating organizational changes that realigned other services under nursing at a cost saving and for her decentralization of decision-making within nursing service.

Dr. Carl J. Gerber, center



director, accepted the association's Employer of the Year Award for his leadership in recognizing the role

nurses play in quality health-care delivery. He elevated nursing management at his center to the associate director level and developed compensation packages for nurses that reward educational advancement and certification. Earlier this year, Gerber was honored by the James H. Quillen College of Medicine, East Tennessee State University, where a lecture hall was named after him.

The Palo Alto, Calif., VA
Health Care System/Stanford University simulation
center for crisis management received a Government

Technology Award for developing a sophisticated computerized training center featuring mannequins on the verge of death. The 1,600square-foot center houses patient simulators, running the same technology used in fullmotion flight simulators. Simulators recreate the operating room, intensive care unit and emergency room. Students can insert intravenous tubes and airway tubes into the mannequins, which have pulses and beating hearts. A student can experience as many as five life-threatening medical crises at a time, such as heart attack, stroke or severe allergic reaction.

Susan Tate, neurological physician assistant (PA) in Little Rock, Ark., VAMC Surgical Service, has been elected vice president of the Arkansas Academy of Physician Assistants. She was president of her PA Class of 1992 at UCLA and is an active member of the Apache Tribe.

The meeting of the Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial (ALLHAT) in Los Angeles presented a special contribution award to Augusta, Ga., VAMC's Dr. Thomas Hartney, primary care physician. The award recognized him for being the "Best Principal Investigator" in ALLHAT Region 1. The Augusta VA ALLHAT site received a Special Contribution Award for being the "Best

Medication and Visit Adherence" in the region. In addition to Hartney, Augusta team members include: Dr. Nanci McPahil; Kay Bigham, PA; Annie Robinson, R.N.; Kim Hamilton, licensed practical nurse; Charlotte Sterett, clinical coordinator; Evelyn Valiquette, program assistant: and Murlane Jones, patient services representative. ALLHAT is a National Institute of Health/ VA-sponsored clinical trial that has recruited more than 600 clinical sites in the United States and Canada to enroll 40,000 high-risk hypertensive patients in testing the efficacy of four types of hypertensive agents for reducing cardiovascular morbidity.

The American Health Information Management Association presented its Mentor Award of the Year to Susan S. Lloyd, Information Service Line, Augusta, Ga., VAMC. She was cited for 20 years as a health information manager with VA during which she provided clinical experience to many students and helped launch the careers of successful health information managers.

Audrey Drake, R.N.,

director of Long Term Care, Acute Care and Quality Management for VA Nursing Service, received the Nurses Organization of Veterans Affairs (NOVA) Professional Nurse Award at the group's national conference. She was honored for her 30-year VA career and her accomplishments and contributions as an instructor, leader and manager.

The Arkansas Association of Health-Systems Pharmacists has named Don Johnson, Little Rock VAMC Pharmacy chief, its Outstanding Hospital Pharmacist of the

Year. The award recognizes both his professional and community leadership and accomplishments. He was cited for his work at a community medical clinic and his coordination of pharmacy support for medical missions to third world countries through Partners in Progress Medical Missions. He has worked at Little Rock VAMC since 1981.

VA's Adaptive Training Program has been selected as one of 20 federal programs highlighted in "Best IT Practices in the Federal Government," a publication issued by the Chief Information Officers Council and the Industry Advisory Council. The Adaptive Training Program, a unit of the Information Technology Support Service, consists of four people, Susan Boaz, **Gerri Harris, Randy Mardres** and Patrick Sheehan. They train some 75 disabled people a year, two-thirds of them veterans. The program was cited as "an outstanding example of good government in that it addresses an important social and economic problem that is not being addressed by the private sector, uses commercial products rather than spending scarce dollars and talent to develop training aids that could only become obsolete as technology evolves, and returns substantial benefits to both the private and other government sectors."

Dr. J. Glen Morris, physician at the Baltimore VAMC, was named "Admiral of the Chesapeake" by Governor Parris N. Glendening for his work heading Maryland's research effort to diagnose the effects of the Pfisteria outbreak on people.



Malcom Randall, director of the Gainesville, Fla., VA



Medical Center for 32 years, retires in April with 59 years of federal service.

At age 81, he is ending the segment of his career he describes as "my avocation and recreation." Randall's life is interwoven with VA history, dating back to when medical leaders began to transform the health-care system for veterans after World War II. Among his many contributions, Randall considers his leadership in promoting VA hospital affiliations with university medical schools the most significant. A WWII Navy veteran, he is a native of East St. Louis, III., and a graduate of St. Louis University with a master's degree in hospital administration.

Family, friends, the Washington journalism community and those involved in serving the homeless gathered at the National Press Club in Washington to honor Sarah McClendon, World War II veteran and pioneering journalist from Tyler, Texas, on the opening of the Sarah McClendon House for homeless veterans. The facility is the result of collaborative effort by the Metro Washington Council for Homeless Veterans, the Chesapeake Health Education Program, the Washington VAMC and other organizations. McClendon long championed initiatives to provide shelter for homeless women treated by the Washington VAMC. She was one of the first members of the VA Women Veterans Advisory Committee formed in 1983. The Sarah McClendon House opened its doors to homeless women veterans late last year and to men in March. It can house eight male and six women residents, including women with children over eight years.

Myrtle J. Savorias, secretary to the director of



VBA Loan Guaranty Service, VACO, retired in March with more

than 55 years of federal service. A Native American member of the Oneida tribe and World War II veteran, Miss Savorias went to work with VA in 1946. Following a short stint in the steno pool, she took a job in Loan Guaranty and served under every director of that service since. She plans to eventually return to her childhood home in Milwaukee.

Veterans Canteen
Service and MCI Telecommunications Corp. are teaming up for a second time to bring former major league baseball stars to visit hospitalized veterans at VA medical centers during April and May. The "Heroes to Heroes"

program features George Foster, Maury Wills, Tug McGraw, Phil Neikro, Tony Perez, Jim "Catfish" Hunter and Bill Mazeroski visiting a total of 15 VA medical centers from April 8 to May 21.

"Shaping America's
Agenda for Homeless
Veterans" is the theme of the
National Coalition for Homeless Veterans conference May
7-9 in Washington, D.C.
Deputy Secretary for Veterans
Affairs Hershel Gober and
Deputy Under Secretary for
Veterans Health Dr. Thomas
Garthwaite will address the
meeting. For full agenda and
details, call 202-546-1969.

El Nino rainstorms that lashed California earlier this year left many homeless. Community shelter space was exhausted in the San Francisco Bay Area, so the VA **Palo Alto Health Care** System partnered with the Salvation Army to provide a 40-bed shelter for the displaced on its Menlo Park campus. Meals came from VA Nutrition and Food Service and many VA employees and their families volunteered to help.

VISTA, the VA Integrated Imaging System, has been nominated for the Computer World Smithsonian Award in the area of medicine. VHA began testing the system in 1991 and gave approval for nationwide use in 1997. It captures and stores clinical imagery, scanned documents and other non-textual data files and integrates them into a patient's electronic medical record. It will ultimately enable VA to operate "filmless" medical imaging systems. It is currently the only imaging system that electronically integrates images with a hospital information system. The Smithsonian awards program

identifies and recognizes visionary use of information technology. VISTA will be included in the Smithsonian's Permanent Research Collection and placed on the Smithsonian's web site, The Innovation Network.

The theme for Asian **Pacific Americans Heritage** Month in May is "Pursuing Progress" and VACO plans two observances. Tina Sung, director of the Federal Quality Consulting Group serving on special assignment to the National Partnership for Reinventing Government, will speak May 13 at noon, VACO room 230. General David Kaleokaika Cooper, founder and president of the Pacific American Foundation and member of the Federal Advisory Committee on Minority Affairs, speaks May 21 at noon, VACO room 230.

The Electronic Reading
Room is an integral part of
the VA web site at
www.va.gov/foia/. It contains
information on Freedom of
Information Act requests as
well as types of records
maintained by VA, public
reading room locations and
copies of FOIA-related
materials. The Office of
Information Resources
Management and VHA
developed the Electronic
Reading Room.

The 1998 edition of the federal government's bestselling consumer booklet, "Federal Benefits for Veterans and Dependents," is now available from the U.S. Government Printing Office and, in limited numbers, through VA channels. The Government Printing Office sells the 89-page handbook to the public for \$3.75, but full text is available free through the Internet on the VA Home Page at www.va.gov/ benefits.htm.

History Piece Surfaces at W. Palm Beach OR

World War II veteran Oscar Propst, 74, of Port St. Lucie, Fla., is feeling a little lighter today. Propst had a bullet removed from his left hip. Not so amazing? Propst received the wound on June 6, 1944.

As part of the first wave to hit Omaha Beach on D day, the 149th Amphibious Combat Engineers took heavy casualties. Among them was Propst, currently an outpatient at the West Palm Beach, Fla., VA Medical Center. Propst sustained two bullet wounds. One went through his left arm, severing nerves



Propst examines the bullet that had his name on it.

and tendons. The other became imbedded in his left thigh. For the past 53 years, Propst carried that bullet with him. When treated back in 1944, he was told that the

bullet would cause him no problems, and to just leave it there.

He came to the VA
Medical Center in January
complaining of pain and
swelling in his left thigh.
When Dr. Joel Vatter, an
orthopedic surgeon at the
medical center, took
Propst to surgery, he
surfaced a bit of history.
While tracing the source of
infection in Propst's thigh,
he found the bullet
protruding just enough to
be removed.

Perfectly intact, the 31-caliber, German-manufactured bullet was of the armor piercing variety. Probst plans to have it gold-plated.



The front page of the Milwaukee Journal Sentinel featured Milwaukee VAMC housekeeping staffer Del Jenkins who saved three children from their burning home. When stopping to visit the family, Jenkins noticed flames coming from their house. He alerted them and got them to safety just as the house went up in flames. The mother of the three children said her children would have died had Jenkins not gotten them out.

☆ ☆ ☆ ☆ ☆

Dr. Znahebia Z. Fort,

physician at the San Juan, Puerto Rico, VA Medical Center, was driving home when she noticed a car accident nearby. She joined paramedics and performed an endotracheal intubation on a seriously injured child. The procedure was complicated by the facial bone fractures and bleeding, and Dr. Fort's work saved the child's life. She remained with the child until hospital staff took over, then provided emotional support to the family during the hours of uncertainty that followed. She continued to visit the child and his family during his weeks of convalescence.

☆ ☆ ☆ ☆ ☆

Two Seattle VA Regional Office employees were lunching in their federal building cafeteria when an IRS employee suddenly collapsed. Realty specialist AI

Hayes and supply technician Lonnie Randle rushed to assist. Hayes applied external heart massage while Randle administered mouth-to-mouth resuscitation until paramedics arrived and took the patient to the hospital. Though the patient died the next day, family and co-workers praised the two men's efforts and were comforted by their presence. Randle received his CPR training during his Navy career. Hayes had been an emergency medical procedures instructor in the Air Force and a CPR instructor in Maryland. He had renewed his CPR certification just the evening before the emergency.

* * * * *

Syracuse, N.Y., VA
Medical Center's quality
assurance coordinator for the
lab Laurie Kratz tested a
specimen for colon cancer
and got a positive result. She
needed to contact the patient
immediately, but she knew
only the patient's name, the

last four digits of his Social Security number and the fact that he had attended a recent VA health fair. The name was not in the VA computer (it was later learned the name had been misspelled when taken from a hard-to-read fair application form) and further inquiries at the medical center proved fruitless.

That didn't stop Kratz. She found the locations of the center's two most recent health fairs and searched local phone directories. After days, she was able to get the patient's full Social Security number and confirm which fair he had attended. She searched Internet yellow pages and called similar names, without luck. Finally, she called the Federal Information Center, which referred her to the Social Security Administration office. After a lengthy security check, they gave Kratz the information. She called the patient and made arrangements for follow-up care at the VA out-patient clinic near him. And she just might have saved his life!